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95 SOUTH MARKET ST., SUITE 420 SAN JOSE, CA 95113 TELEPHONE (408) 971-2573 FAX (408) 971-4660

FAX COVER SHEET

Date: December 22, 2004 To: Examiner Ali Bayat From: Kevin J. Zilka Oocket No.: NVIDP044/P000245 Total Number of Pages Being Transmitted, Including	App. No:	. (703) 872-9306
Docket No.: NVIDP044/P000245	App. No:	00/929 427
•	App. No:	09/929 427
Total Number of Pages Being Transmitted, Including		031723,421
	Cover Sheet: 17	
Message:		
Please deliver to Examiner Bayat.		
Thank you,		
Kevin J. Zilka		

Original to follow Via Regular Mail X Original will Not be Sent	Original will follow Via Overnight Courier
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December 21, 2004

SVIPG

408 971 4660

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DEC 2 2 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re t	he application of:)
	John M. Danskin et al.) Art Unit: 2625) Examiner: Bayat, Ali
Applic	cation No. 09/929,427)) Dckt.:
Filed:	08/13/2001) NVIDP044/P000245)) Date: 12/22/2004
For:	MULTI-MODE TEXTURE COMPRESSION ALGORITHM)))

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA-22313-1450 at facsimile number: (703)

872-9306 on the above date.

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining Alter <u>Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	SMALL ENT RATE FEE	ITY	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS		_22	04	X25 = \$	OR	X50 =	\$200
INDEP CLAIMS		_09	_04	X100=\$	OR	X200 =	\$800
[] Multiple Dependent Claim Present			\$0			\$0	
and Fee Not	Previously Paid		TOTAL	\$			\$1.000,00

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.

Enclosed is our Check No. in the amount of \(\S \) to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NVIDP044).

A copy of this sheet is enclosed for billing purposes.

Respectfully submitted, Zilka-Kotab, PC

Registration No. 41,429

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised 17%)

Dec 22 04 10:30a

SVIPG

DEC 2 2 2004

408 971 4660

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PATENT

In re the application of:)	
) Art Unit: 2625	
John M. Danskin et al.)	
) Examiner: Bayat, Ali	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

) Dckt.:

) NVIDP044/P000245

) Date: 12/22/2004

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA/22313-1450 at facsimile number: (703)

872-9306 on the above date.

Signed

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

For:

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

Application No. 09/929,427

MULTI-MODE TEXTURE

COMPRESSION ALGORITHM

Filed: 08/13/2001

	Claims Remaining After <u>Amendment</u>	Highest Previously Paid For	Present <u>Extra</u>	SMALL ENT RATE FEE	TITY	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS		22	04	X25 = \$	OR	X50 =	\$200
INDEP CLAIMS	_13	_09	_04	X100=\$	OR	X200 =	\$800
[] Multiple Dependent Claim Present and Fee Not Previously Paid			\$0			\$ 0	
and ree Not	. Freviously Faid		TOTAL	\$			\$1,000.00

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351. Enclosed is our Check No. in the amount of \(\subseteq \) to cover the additional claim fee and/or extension of time fees.

If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NVIDP044). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted, ilka-Kotab, PC

Registration No. 41,429

P.O. Box 721120 San Jose, CA 95172-1120

Telephone: (408) 971-2573

(Revised 17%)

Dec 22 04 10:30a SVIPG

408 971 4660

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DEC 2 2 2004

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

John M. Danskin et al.

Application No. 09/929,427

Application No. 09/929,427

Dokt.:

NVIDP044/P000245

Filed: 08/13/2001

For: MULTI-MODE TEXTURE

COMPRESSION ALGORITHM

Art Unit: 2625

Dexaminer: Bayat, Ali

NVIDP044/P000245

Date: 12/22/2004

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile pambers (703) 872-9306 on

Signed: Erica Farlow

AMENDMENT A

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to an Office Action mailed on 11/15/04, please enter the following in the above application: